

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		71530	1/13
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AH	60245	1/24
RESPONSE FORMALITY REVIEW			2/15/02

09/474043

# INDEX OF CLAIMS

✓ Rejected N Non-elected  
= Allowed I Interference  
- (Through numeral) Canceled A Appeal  
+ Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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